

10-01-01
PART B—ISSUE FEE TRANSMITTALBox ISSUE FEE
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WM02/0703

CALVIN WALKER
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ST LOUIS MO 63147

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CALVIN WALKER

(Depositor's name)

Calvin Walker

(Signature)

9/29/01

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/370,611	08/07/99	001	NGUYEN, H	2632 07/03/01
First Named Applicant	WALKER, 35 USC 154(b) term ext. = 0 Days.			

TITLE OF INVENTION LOCATION SPECIFIC ALARM RELAY (L.S.A.R.)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2	340-691.100	173	UTILITY	YES	\$620.00	10/03/01

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE CALVIN WALKER

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

 Issue Fee Advance Order - # of Copies _____

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

9/29/01

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